

# **BITS & PIECES OF TUBERCULOSIS FOR PUBLIC HEALTH NURSES**

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# *First Things First...Thank You!*



# *Thank You for...*

- Getting the job done!
- Knowing your communities
- Willing to go the extra mile
- Loving your patients...even when they are unlovable!!
- Being culturally sensitive
- And ALWAYS being CREATIVE!!

# ***Without Public Health Nurses...***

The job of TB prevention, control and elimination throughout the communities in West Virginia would not be possible.

# ***Conclusion:***

- YOU are changing your patients' world as well as ours!
- YES, YOU ARE IMPORTANT!!
- THANK YOU, THANK YOU AND THANK YOU AGAIN!!

# ***WV DIVISION OF TB ELIMINATION'S CHARGE:***

**To protect the public from TB infection and/or disease by preventing, controlling and eventually, eliminating tuberculosis in West Virginia.**

**This is also Local Public Health's Charge.**

# ***WV-DTBE'S MISSION /PURPOSE:***

To achieve the absence of indigenous transmission of tuberculosis infection in West Virginia, which results in clinically apparent tuberculosis disease.



# ***THREE PRIORITY STRATEGIES FOR TUBERCULOSIS IN WV:***

1. Identify and treat to completion all persons with TB disease
2. Identify contacts to persons with infectious TB; evaluate, treat and COMPLETE!
3. Test high-risk groups for TB infection; evaluate, treat and COMPLETE!!



# *State vs Local Responsibilities*

## What are they?

# ***Services Provided by WV-DTBE***

- ✓ Disseminate TB information to counties, private providers, other states, etc.
- ✓ Maintain registries of all cases of TB and TB Infection reported to WV-DTBE
- ✓ Provide forms and instructions for reporting
- ✓ Monitor case management
- ✓ Provide TB guidance and assistance as necessary

# *Services Provided by WV-DTBE (cont.)*

- ✓ Provide medications for TB disease and infection
- ✓ Provide screening supplies to LHDs for TST and IGRA testing of high-risk populations
- ✓ Provide LHDs with Rad. Tech. and CXR interpretations for evaluation of TB disease and infection
- ✓ Provide LHDs TB clinicians for Diagnostic Clinics

# ***Services Provided by WV-DTBE (cont.)***

- ✓ Provide TB Medical Consultation
- ✓ Provide most up-to-date TB information and guidelines for the care of patients with TB disease and infection
- ✓ Provide Liver Function Tests and CBCs & other labs as indicated
- ✓ Provide lab services (AFB smear and culture, rapid tests, drug sensitivities and DNA fingerprinting)

# ***Services Provided by WV-DTBE (cont.)***

- ✓ Assist/guide in court ordered detentions
- ✓ Collect data, interpret and report to CDC
- ✓ Provide dictation services
- ✓ Reimburse LHDs for DOT and case management services
- ✓ Facilitate Cohort Process

# *Services Provided by WV-DTBE (cont.)*

- ✓ Provide TB training
- ✓ Manage CDC grants and state funding for TB
- ✓ Provide platform and facilitate the WV TB Advisory Committee

# ***Local Health Department Role & Responsibilities***

- ✓ Provide reports as required to WV-DTBE
- ✓ Manage targeted testing for county
- ✓ Manage CXR Clinics
- ✓ Manage Chest Diagnostic Clinics
- ✓ Provide TB education to public and patients
- ✓ Provide case management services for patients



# ***Local Health Department Role & Responsibilities (cont.)***

- ✓ Provide DOT and DOPT to TB patients
- ✓ Provide Contact Investigation for TB cases
- ✓ Participate in Cohort Review Process
- ✓ Maintain patient records at LHD facility
- ✓ Enforce TB rules and laws for county
- ✓ Maintain updated TB knowledge by participating in training opportunities

# ***Local Health Department Role & Responsibilities (cont.)***

✓ **REMEMBER:**

**YOU are the TB expert for your  
jurisdiction!!**

# LAWS / RULES

All laws and rules pertaining to TB or Communicable Diseases are posted on our website, [www.tb.wv.gov](http://www.tb.wv.gov). There are also copies of the laws and rules in your packets.

# ***WV-DTBE***

## ***Initiatives/Accomplishments***

- October 2008 ~ Limited use of IGRA begun
- January 2010 ~ Start discontinuing serial CXRs and unnecessary Diagnostic Clinic Visits
- September 2011 ~ Use of T-SPOT expanded to all State
- September 2011 ~ Risk Assessment and TB Testing Criteria Implemented
- January 2012 ~ Use of 12 week Rifapentine/INH Regimen for TB Infection begun

# Review of Monthly TB Testing Report 2012

| <b>CATEGORY</b>        | <b>HIGH</b>  | <b>LOW</b>    |
|------------------------|--------------|---------------|
| <b># GIVEN</b>         | <b>3,419</b> | <b>27,067</b> |
| <b># READ</b>          | <b>2,596</b> | <b>23,665</b> |
| <b># IGRAS</b>         | <b>976</b>   | <b>155</b>    |
| <b># POSITIVES</b>     | <b>145</b>   | <b>104</b>    |
| <b>POSITIVITY RATE</b> | <b>4.06%</b> | <b>0.44%</b>  |

# REVIEW OF TB TESTING REPORT

## 2013

### (Jan.-June)

| CATEGORY        | HIGH  | LOW   |
|-----------------|-------|-------|
| # GIVEN         | 1,360 | 8,061 |
| # READ          | 976   | 7,499 |
| # IGRAS         | 444   | 53    |
| # POSITIVES     | 49    | 34    |
| POSITIVITY RATE | 3.45% | 0.45% |

# ***Future Initiatives***

- ❖ Remove law re: TB Testing of new hires by Boards of Education and students entering from out of state
- ❖ Expand IGRA testing to all High-Risk persons
- ❖ Eliminate testing of Low-Risk Persons
- ❖ Obtain digital component to portable x-ray machine
- ❖ Obtain “Web-MD”-type equipment to be able to conduct remote Diagnostic Clinics



# ***Work Smarter and Leaner***

It is WV TB Control's duty to make certain that as both Federal and State funding levels decrease, the work done in WV towards TB prevention, control and elimination be **focused** and that **priorities be clearly identified**

# ***Public Health Nurses:***

“Never doubt that a small group  
of thoughtful,  
committed people can change  
the world...

Indeed, it is the only thing that  
ever has.”

~Margaret Mead~